## **CORRECTED HELIPORT PERMIT - APPLICATION**

DOA-0202 (Rev. 02/98)

PLEASE PRINT OR TYPE	
PART I. GENERAL INFORMATION	
HELIPORT NAME	PERMIT NUMBER
PART II. COMPLETE IF CHANGE OF HELIPORT NAME OR OWNER  CORRECTED PERMIT - FOR A CHANGE IN OWNERSHIP, SUBMIT PROOF OF OWNERSHIP (deed, lease, other) WITH APPLICATION	
NEW HELIPORT NAME	
NEW OWNER'S NAME	
NEW OWNER'S ADDRESS	
BUSINESS TELEPHONE NUMBER	FAX NUMBER
AGENT NAME (IF APPLICABLE)	
AGENT'S ADDRESS	
BUSINESS TELEPHONE NUMBER	FAX NUMBER
PART III. COMPLETE FOR TO CHANGE CONDITIONS ON A HELIPORT PERMIT	
DESCRIPTION OF CHANGE (Use Additional Sheet if Necessary)	
	ANTICIPATED COMPLETION DATE
PART IV. CERTIFICATION	
I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT I AM AUTHORIZED TO REQUEST THE CHAN	IGES INDICATED ABOVE.
OWNER'S OR AGENT'S SIGNATURE	TITLE
PRINT NAME	DATE

SEND COMPLETED APPLICATION AND ALL NECESSARY DOCUMENTS TO:

CALIFORNIA DEPARTMENT OF TRANSPORTATION DIVISION OF AERONAUTICS - MS #40 P. O. BOX 942874 SACRAMENTO, CA 94274-0001